



## FOLLOW-UP TRAINEE INTERVIEW

Name: Date of interview:			
Sex:			
Age: $\Box 18 - 24$ $\Box 25 - 34$ $\Box 35 - 50$ $\Box 50+$			
Ethnicity: ☐ White ☐ African American ☐ Native American ☐ Hispanic ☐ Other:			
Classification per NCDOT record (from Spreadsheet)			
Training begin date: month year			
Hours Completed: $\Box 0 - 250$ $\Box 251 - 500$ $\Box 501 - 750$ $\Box 751 - 1000$ $\Box 1001 - 1500$ $\Box 1501 - 2100$			
Date: month year			
Length of time on the job: ☐ Less than 6 months ☐ 6 months or more			
Contractor:			
Name of your Supervisor:			
Job Site:			
1. Does your training continue to prepare you for your job?	☐ Yes ☐ No		
2. Are you continuing to learn new skills in your training?	☐ Yes ☐ No		
3. Does your supervisor give you support and encouragement?	☐ Yes ☐ No		
4. Does your mentor give you the training in accordance with your job classification?	☐ Yes ☐ No		
5. Are you receiving periodic reports documenting your performance?	☐ Yes ☐ No		
6. Are you satisfied with the job-related safety training provided?	☐ Yes ☐ No		

7. What do you expect to gain from	om the OJT Program?	
* Which one is the most impo	rtant to you?	
	-To receive the NCDOT OJT certificate □	
	-To gain the necessary skills to do the job	
	-To receive a promotion □	
FURTHER COMMENTS:		
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Trainee Signature:		
OJT Representative Signature: _		